ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NJ.	DATE
FEE DETERMINATION	E.H.		05-31-01
O.I.P.E. CLASSIFIER		8	6-11-01
FORMALITY REVIEW	400	36864	7/26/21
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

-	Rejected	N	Non-elected
#	Allowed	- 1	Interference
_	(Through numeral) Canceled	A	Appeal
÷	Restricted	0	Objected

Claim Date	Claim	Della	Claim	Date
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10 / V	61	╏╺╃╸┞╸╏╸╋╺╏ ╺┪	110	╌╀╌╁╌╂╌╁╌┼╌
	62	┠╌╏┈┇═┇ ╌┩╼╂╌╂╌┦	112	╌╂╶╂╌╂╌╂╌┦╌╂╌
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If more than 150 claims or 10 actions staple additional sheet here

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